EMERGENCY EQUIPMENT RENTAL AGREEMENT For use with Local Govt Fire Forces' equipment hired UN-OPERATED AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS RELATING 1. ORDERING OFFICE (name and address) TO THIS AGREEMENT 2. AGREEMENT NUMBER 3. EFFECTIVE DATES a. beginning b. ending 4. CONTRACTOR a. name and address 5. POINT OF HIRE (location when hired) THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY X CONTRACTOR b. SSN or Tax ID# GOVERNMENT OPERATOR FURNISHED BY c. telephone number (day) d. telephone number (night) **GOVERNMENT** CONTRACTOR 8. TYPE OF CONTRACTOR (X appropriate boxes) ☐ SMALL BUSINESS ☐ LARGE BUSINESS ☐ SMALL DISADVANTAGED OWNED ☐ WOMEN OWNED ☐ LABOR SURPLUS AREA ☐ LOCAL GOVT. 9. ITEM DESCRIPTION 10. NUMBER 11. WORK OR DAILY 12. SPECIAL 13. GUARANTEE SINGLE SHIFT DOUBLE SHIFT (Include make, model, year, serial # and accessories) (8 or more hours) OF **OPERATORS** a. rate b. unit a. rate b. unit 14. SPECIAL PROVISIONS When equipment qualifies as more than one type, it will be paid at the rate ordered as documented on the resource order. On the first and last day of a dispatch, equipment will be paid at the hourly rate, not to exceed the daily rate. Rates include 5% adjustment for equipment with foam capability, if applicable. c) Each shift shall have a separate operator or crew. Equipment will be paid for a double shift only if ordered as such and staffed with a separate operator or crew for the second shift. General Clauses to the EERA OF294 (11/04 version) are attached hereto and incorporated herein by reference. Montana DNRC is the responsible agency for payment of local government fire forces from Montana. Send payment package to Ordering Office listed in block 1. Operators of this equipment have been hired by MT DNRC as casuals (EFF's). Equipment rates shown are on an unoperated basis. g) This agreement is not valid outside the Northern Rockies Geographic Area. Montana DNRC will not process payments for use outside of Northern Rockies Geographic Area, and any liability for loss incurred during such use will be assumed by Contractor. 16. DATE 18. DATE 15. CONTRACTOR'S OR AUTHORIZED AGENT'S SIGNATURE 17. CONTRACTING OFFICER'S SIGNATURE 19. PRINT NAME AND TITLE 20. PRINT NAME AND TITLE

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